

Fill in this information to identify the case:Debtor Name The Pearl Theatre Company, Inc.United States Bankruptcy Court for the: Southern District of NY
(State)Case number (If known): 17-11572 (SHL)☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*\$ Unknown**1b. Total personal property:**Copy line 91A from *Schedule A/B*\$ 113,101.94 +
Unknown**1c. Total of all property:**Copy line 92 from *Schedule A/B*\$ 113,101.94 +
Unknown**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D

\$ 85,036.82**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*\$ 20,241.61 +
Unknown**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*+ \$ 408,689.73 +
Unknown**4. Total liabilities**

Lines 2 + 3a + 3b

\$ 513,968.16 +
Unknown

Fill in this information to identify the case:Debtor name The Pearl Theatre Company, Inc.United States Bankruptcy Court for the: Southern District of NY
(State)Case number (if known): 17-11572 (SHL)☐ Check if this an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**\$1,458.85**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. ChaseChecking8552\$03.2. ChaseChecking8066\$03.3. CitiWealth ManagementC49-114652\$0**4. Other cash equivalents (Identify all)**4.1. Paypal\$31.50

4.2. _____

\$**5. Total of Part 1**\$1,490.35

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Security Deposit for lease for the premises located at 553 West 42nd Street held by Massachusetts Mutual Life Insurance Company\$66,330.227.2. Contractual bond for League of Resident Theatres held in favor of Actors Federal Credit Union\$18,706.60

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Payroll Service Customer Asset \$-553.47
8.2. Prepaid Expenses \$-2,896.18

9. Total of Part 2

Add lines 7 through 8. Copy the total to line 81.

\$81,235.26

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less: _____ - \$ _____
_____ = _____ →
face amount doubtful or uncollectible accounts
11b. Over 90 days old: _____ - \$ _____
_____ = _____ →
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments

13. Does the debtor own any investments

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method used for current value **Current value of debtor's interest**

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____ \$ _____
14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: _____ % of ownership: _____

15.1. _____ % \$ _____
15.2. _____ % \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____
16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☐ No.
☐ Yes.

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No.
☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No.
☐ Yes.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples: Livestock, poultry, farm-raised fish</i>			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____
33. Total of Part 6			\$ _____

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?

- ☐ No.
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No.
☐ Yes.

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No.
☐ Yes. Book value \$_____ Valuation method _____ Current value \$_____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No.
☐ Yes.

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No.
☐ Yes.

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
_____	\$ _____	_____	\$ _____
40. Office fixtures			
_____	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software			
Computer and telephone equipment	\$2,540	_____	\$2,540.00
42. Collectibles <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1 <u>Costumes and Props</u>	\$Unknown	_____	\$Unknown
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. Total of Part 7

Add lines 39 through 42. Copy the total to line 86.

\$2,540.00 + Unknown**44. Is a depreciation schedule available for any of the property listed in Part 7?**

- ☐ No.
☒ Yes.

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No.
☐ Yes.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1	_____	\$ _____	_____	\$ _____
47.2	_____	\$ _____	_____	\$ _____
47.3	_____	\$ _____	_____	\$ _____
47.4	_____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1	_____	\$ _____	_____	\$ _____
48.2	_____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1	_____	\$ _____	_____	\$ _____
49.2	_____	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

Theatre Equipment	\$27,930.33	_____	\$27,930.33
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51. Total of Part 8

Add lines 47 through 50. Copy the total to line 87.

\$27,930.33

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No.
☒ Yes.

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No.
☐ Yes.

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 <u>553 West 42nd Street, New York, NY 10018</u>	<u>Lease</u>	<u>\$Unknown</u>		<u>\$Unknown</u>
55.2 _____	_____	<u>\$</u> _____		<u>\$</u> _____
55.3 _____	_____	<u>\$</u> _____		<u>\$</u> _____
55.4 _____	_____	<u>\$</u> _____		<u>\$</u> _____
55.5 _____	_____	<u>\$</u> _____		<u>\$</u> _____
55.6 _____	_____	<u>\$</u> _____		<u>\$</u> _____

56. Total of Part 9

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$Unknown**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No.
☐ Yes.

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No.
☐ Yes.

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
_____	<u>\$</u> _____	_____	<u>\$</u> _____
61. Internet domain names and websites			
<u>Pearltheatre.org, pearltheater.org</u>	<u>\$ Unknown</u>	_____	<u>\$ Unknown</u>
62. Licenses, franchises, and royalties			
<u>Figaro by Charles Morey. And Away We Go by Terrence McNally. Vanity Fair by Kate Hamill</u>	<u>\$Unknown</u>	_____	<u>\$Unknown</u>
63. Customer lists, mailing lists, or other compilations			
<u>Pearl Theatre mailing list</u>	<u>\$ Unknown</u>	_____	<u>\$ Unknown</u>
64. Other intangibles, or intellectual property			
_____	<u>\$</u> _____	_____	<u>\$</u> _____
65. Goodwill			
_____	<u>\$</u> _____	_____	<u>\$</u> _____

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$Unknown

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No.
☒ Yes.

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No.
☐ Yes.

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No.
☐ Yes.

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

**Current value of
debtor's interest****71. Notes receivable**

Description (include name of obligor)

_____ Total face amount - _____ doubtful or uncollectible accounts = → \$ _____

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuitiesDirectors and Officers Insurance Policy\$Unknown**74. Causes of action against third parties (whether or not a lawsuit has been filed)**The Fellowship for the Performing Arts (no lawsuit filed)\$UnknownNature of claim Breach of ContractAmount requested \$Unknown**75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**_____
\$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property_____
\$ _____**77. Other property of any kind not already listed** Examples: Season tickets, country club membership_____
\$ _____
\$ _____**78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$Unknown**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No.
☐ Yes.

Part 12:

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$1,490.35	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$81,235.26	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$	
83. Investments. <i>Copy line 17, Part 4.</i>	\$	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$2,540.00 + Unknown	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$27,930.33	
88. Real property. <i>Copy line 56, Part 9.....</i> →		\$Unknown
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$	
90. All other assets. <i>Copy line 78, Part 11.</i> +	\$Unknown	
91. Total. Add lines 80 through 90 for each column.....91a.	\$113,101.94 + Unknown	\$Unknown
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$113,101.94 + Unknown

Fill in this information to identify the case:

Debtor name The Pearl Theatre Company, Inc.

United States Bankruptcy Court for the: Southern District of NY
(State)

Case number (If known): 17-11572 (SHL)

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
---	--

2.1	Creditor's name <u>Actors Federal Credit Union</u>	Describe debtor's property that is subject to a lien <u>Bond</u>	<u>\$18,706.60</u>	<u>\$18,706.60</u>
	Creditor's mailing address _____ _____	_____ _____		
	Creditor's email address, if known _____	Describe the lien <u>Possessory</u>		
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.2	Creditor's name <u>Massachusetts Mutual Life Insurance Company</u>	Describe debtor's property that is subject to a lien <u>Security Deposit</u>	<u>\$66,330.22</u>	<u>\$66,330.22</u>
	Creditor's mailing address _____ _____	_____ _____		
	Creditor's email address, if known _____	Describe the lien <u>Possessory</u>		
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No Specify each creditor, including this creditor, and its relative priority. _____ _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<input type="checkbox"/> Yes. The relative priority of creditors is specified on _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Part 1: List Creditors Who Have Secured Claims

lines _____.	
3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.	<u>\$85,036.82</u>

Fill in this information to identify the case:

Debtor The Pearl Theatre Company, Inc.
United States Bankruptcy Court for the: Southern District of NY
(State)
Case number: 17-11572 (SHL)
(If known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <u>Utrice V. Coleman</u> <u>461 Skidmore Road</u> <u>Deer Park, NY 11729-6817</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$Unknown</u> <u>\$Unknown</u>
2.2	Priority creditor's name and mailing address <u>Helen Jackson</u> <u>21 Trinity Place Apt 301</u> <u>Montclair, NJ 07042</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$Unknown</u> <u>\$Unknown</u>
2.3	Priority creditor's name and mailing address <u>Sally Q. Mason</u> <u>315 East 88th Street, Apt. 2B</u> <u>New York, NY 10128</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$Unknown</u> <u>\$Unknown</u>
2.4	Priority creditor's name and mailing address <u>Caroline J. H. Parker</u> <u>116 Chilton Street</u> <u>Elizabeth, NJ 07208</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$Unknown</u> <u>\$Unknown</u>
2.5	Priority creditor's name and mailing address <u>Isabel Quinzanos Alonso</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$Unknown</u> <u>\$Unknown</u>

Debtor The Pearl Theatre Company, Inc.
Name _____

Case number (if known) 17-11572 (SHL)

92 Morningside Avenue, Apt 6D
New York, NY 10027
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.6 **Priority creditor's name and mailing address**
Joan L. Larson
12 York Terrace
Short Hills, NJ 07078
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.7 **Priority creditor's name and mailing address**
Ackerman, Jill and Aserlindd, Marc
1787 Madison Ave 309
New York, NY 10035
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.8 **Priority creditor's name and mailing address**
Ackerman, Marilyn
481 17th Street, Apt. 4L
Brooklyn, NY 11215
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.9 **Priority creditor's name and mailing address**
Alexander, Karen
1 Lawrence Street
Metuchin, NJ 08840
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.10 **Priority creditor's name and mailing address**
Allison, Carole
48 Woolsey Court
Pennington, NJ 08534
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.11 **Priority creditor's name and mailing address**
Ambruster, Nancy
42 West 13th Street, Apt. 2B
New York, NY 10011
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒ No
☐ Yes

2.12 Priority creditor's name and mailing address
Amore, Carol
577 Grand Street, Apt. F1604
New York, NY 10002

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Date or dates debt was incurred
Unknown

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Last 4 digits of account number

Basis for the claim:
Ticket Refund

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

Is the claim subject to offset?
☒ No
☐ Yes

2.13 Priority creditor's name and mailing address
Anderson, Elizabeth and Mahon, Joseph C.
12 Beekman Place, Apt.12D
New York, NY 10022

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Date or dates debt was incurred
Unknown

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Last 4 digits of account number

Basis for the claim:
Ticket Refund

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

Is the claim subject to offset?
☒ No
☐ Yes

2.14 Priority creditor's name and mailing address
Anderson, Jean and Mitchell, William
25 Bay Street
Bronx, NY 10464

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Date or dates debt was incurred
Unknown

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Last 4 digits of account number

Basis for the claim:
Ticket Refund

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

Is the claim subject to offset?
☒ No
☐ Yes

2.15 Priority creditor's name and mailing address
Anthony, Carmen and Maher, Gerard
301 East 69th Street, apt. 11G
New York, NY 10021

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Date or dates debt was incurred
Unknown

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Last 4 digits of account number

Basis for the claim:
Ticket Refund

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

Is the claim subject to offset?
☒ No
☐ Yes

2.16 Priority creditor's name and mailing address
Apt, Lesley
32 Smoke Hill Drive
Stamford, CT 06903

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Date or dates debt was incurred
Unknown

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Last 4 digits of account number

Basis for the claim:
Ticket Refund

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

Is the claim subject to offset?
☒ No
☐ Yes

2.17 Priority creditor's name and mailing address
Arlen, Areta
160 West 96th Street, Apt.L
New York, NY 10025

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Date or dates debt was incurred
Unknown

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Last 4 digits of account number

Basis for the claim:
Ticket Refund

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

Is the claim subject to offset?
☒ No
☐ Yes

2.18 Priority creditor's name and mailing address
Attivissimo, Luisa
68-16 Juno Street
Forest Hills, NY 11375

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.19 Priority creditor's name and mailing address

Auerbach, Regina
35 Seacoast Terrace, Apt. 20U
Brooklyn, NY 11235

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.20 Priority creditor's name and mailing address

Auld, Peter and Faye
9 Windsor Road
Hastings-on-Hudson, NY 10706

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.21 Priority creditor's name and mailing address

Bach, Virginia and Arthur
618 Third Street
Brooklyn, NY 11215

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.22 Priority creditor's name and mailing address

Baginski, Anthony
79 Valley View Drive
Stamford, CT 06903

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.23 Priority creditor's name and mailing address

Bakunin, Rebecca
44B Morton Street
New York, NY 10014

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.24 Priority creditor's name and mailing address

Baldwin, William and Susan
90 LaSalle Street, Apt. 18A
New York, NY 10027

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.25	Priority creditor's name and mailing address <u>Banasiewicz, Jake</u> <u>200 E. 6th St.</u> <u>New York, NY 10003</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.26	Priority creditor's name and mailing address <u>Barak, Marion</u> <u>200 East 66th Street, D704</u> <u>New York, NY 10065</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.27	Priority creditor's name and mailing address <u>Baratta, Rosemarie</u> <u>100 Trenton Avenue</u> <u>Long Beach, NY 11561-1135</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.28	Priority creditor's name and mailing address <u>Barchat, Annette</u> <u>3003 West 66th Street</u> <u>New York, NY 10023</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.29	Priority creditor's name and mailing address <u>Bard, Maria and Enzo</u> <u>1930 Harte St</u> <u>Baldwin, NY 11510</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.30	Priority creditor's name and mailing address <u>Barr, Dolores</u> <u>148-30 58th Road</u> <u>Flushing, NY 11355</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.31	Priority creditor's name and mailing address <u>Barrett, Virginia</u> <u>60 Rockland Rd.</u> <u>Sparkill, NY 10976</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.32 Priority creditor's name and mailing address

Barros, Maria
41-16, 47th Ave, 1B
Sunnyside, NY 11104

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.33 Priority creditor's name and mailing address

Barry, Dorothy
6715 102nd Street, Apt.7N
Forest Hills, NY 11375

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.34 Priority creditor's name and mailing address

Barry, Janet
106-15 Queens Boulevard, Apt. 2R
Forest Hills, NY 11375

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.35 Priority creditor's name and mailing address

Belzer, Alan and Martin, Susan
One Fifth Avenue, Apt. 20 C
New York, NY 10003

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.36 Priority creditor's name and mailing address

Bendersky, Martin
49 Randall Road
Princeton, NJ 08540

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.37 Priority creditor's name and mailing address

Benner, James and Huber, Jane
256 Pine Avenue
Manasquan, NJ 08736

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.38 Priority creditor's name and mailing address

Bennett, Hillel

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

444 East 86th Street, Apt. 5F
New York, NY 10028
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.39 Priority creditor's name and mailing address

BennMcElderry, Yvonne
313 West 143rd Road, Apt. 3C
New York, NY 10030

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.40 Priority creditor's name and mailing address

Berenzweig, Marc
405 River West
Greenwich, CT 06831

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.41 Priority creditor's name and mailing address

Berger, David
315 East 51st Street, Apt. A
New York, NY 10022

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.42 Priority creditor's name and mailing address

Berger, Michael
357 Strawtown Road
West Nyack, NY 10994

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.43 Priority creditor's name and mailing address

Berk, Elaine
180 Franklin Corner Road, Apartment C4
Lawrenceville, NJ 08648

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.44 Priority creditor's name and mailing address

Berman, Elliot and Ann
200 East 82nd Street, Apt. 16C
New York, NY 10028

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒
- No
-
- ☐
- Yes

2.45 Priority creditor's name and mailing address
Berman, Judith
2045 East 35th Street
Brooklyn, NY 11234Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.46 Priority creditor's name and mailing address
Bernard, Anita
32-16 162nd Street
Flushing, NY 11358Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.47 Priority creditor's name and mailing address
Bernstein, Sarah
119 Essex Street, Apt 5R
New York, NY 10002Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.48 Priority creditor's name and mailing address
Bettelheim, Ruth
1 River Place, Apt. 3807
New York, NY 10036Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.49 Priority creditor's name and mailing address
Bianco, Mary
353 Bay Ridge Parkway, Apt. 3F
Brooklyn, NY 11209Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.50 Priority creditor's name and mailing address
Binder, Diane
2571 Locust Avenue
N Bellmore, NY 11710Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.51 Priority creditor's name and mailing address
Binkow, Maurice
505 East Huron Street
Ann Arbor, MI 48104As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.52 Priority creditor's name and mailing address

Blanding, Vermell
2244 Bronx Park East, Apt. 6B
Bronx, NY 10467

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.53 Priority creditor's name and mailing address

Blaskovitch, John
695 85th Street
Brooklyn, NY 11228-3214

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.54 Priority creditor's name and mailing address

Bloom, Flora
1485 East 21st Street
Brooklyn, NY 11210

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.55 Priority creditor's name and mailing address

Bloom, Susan
70 East 10th Street
New York, NY 10003

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.56 Priority creditor's name and mailing address

Bogush, Jennifer
445 Topping Hill Road
Westfield, NJ 07090

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.57 Priority creditor's name and mailing address

Bonacci, Caroline
220 48 75th Avenue, Apt. 1
Oakland Gardens, NY 11364

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.58	Priority creditor's name and mailing address <u>Breitbart, Todd</u> <u>205 West End Avenue, Apt. 18E</u> <u>New York, NY 10023-4812</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.59	Priority creditor's name and mailing address <u>Brennan, Lorraine and Terence</u> <u>301 East 22nd Street, Apt. 1D</u> <u>New York, NY 10010</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.60	Priority creditor's name and mailing address <u>Breslin, Jonathan and Keen, Linda</u> <u>160 West End Ave 17E</u> <u>New York, NY 10023-5610</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.61	Priority creditor's name and mailing address <u>Bresler, Ruth and Sidney</u> <u>263 West End Avenue, Apt. 5B</u> <u>New York, NY 10023</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.62	Priority creditor's name and mailing address <u>Briggs, June</u> <u>170 East 79th Street, Apt. 5B</u> <u>New York, NY 10075</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.63	Priority creditor's name and mailing address <u>Brings, Genevieve</u> <u>199 Mountain Road</u> <u>Wilton, CT 06897-1526</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.64	Priority creditor's name and mailing address <u>Brooks, Hal</u> <u>555 W 42nd Street</u> <u>New York, NY 10036</u> Date or dates debt was incurred <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>1,346.15</u>	\$ <u>1,346.15</u>

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

2.65 Priority creditor's name and mailing address
Brown, Nancy and Daniel
577 Smithfield Valley Road
Amenia, NY 12501

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.66 Priority creditor's name and mailing address
Bruce, Joan
175-20 Wexford Terrace, Apt. 12E
Jamaica Estates, NY 11432

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.67 Priority creditor's name and mailing address
Bryant, Gregory
690 Summer Street
Weymouth, MA 02188

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.68 Priority creditor's name and mailing address
Burke, Dorothy and William
62 Hegemans Lane
Old Brookville, NY 11545

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.69 Priority creditor's name and mailing address
Burke, Rose
451 Main St., Apt. 50
Northport, NY 11768

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

2.70 Priority creditor's name and mailing address
Burkle, Jess
555 West 42nd Street
New York, NY 10036

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

Salary

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Salary and Reimbursement

Is the claim subject to offset?

☒ No
☐ Yes

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$9,588.54 \$9,588.54

As of the petition filing date, the claim is: \$Unknown \$Unknown

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Butenst, Fran
1530 Palisade Avenue, Apt. 22R
Fort Lee, NJ 07024

Date or dates debt was incurred

Unknown

**Last 4 digits of account
number** _____

**Specify Code subsection of PRIORITY unsecured
claim:** 11 U.S.C. § 507(a)(7)

2.72 Priority creditor's name and mailing address

Cagle, Diana
67-41 Burns Street, Apt. 216
Forest Hills, NY 11375

Date or dates debt was incurred

Unknown

**Last 4 digits of account
number** _____

**Specify Code subsection of PRIORITY unsecured
claim:** 11 U.S.C. § 507(a)(7)

2.73 Priority creditor's name and mailing address

Caldwell, Sharon and Peter
11 Glenwood Terrace
Bridgewater, NJ 08807

Date or dates debt was incurred

Unknown

**Last 4 digits of account
number** _____

**Specify Code subsection of PRIORITY unsecured
claim:** 11 U.S.C. § 507(a)(7)

2.74 Priority creditor's name and mailing address

Campos, Donna and Eduardo
2000 Linwood Avenue, Apt. 18K
Fort Lee, NJ 07024

Date or dates debt was incurred

Unknown

**Last 4 digits of account
number** _____

**Specify Code subsection of PRIORITY unsecured
claim:** 11 U.S.C. § 507(a)(7)

2.75 Priority creditor's name and mailing address

Canter, Carol
71 East 77th Street, Apt. 6D
New York, NY 10075

Date or dates debt was incurred

Unknown

**Last 4 digits of account
number** _____

**Specify Code subsection of PRIORITY unsecured
claim:** 11 U.S.C. § 507(a)(7)

2.76 Priority creditor's name and mailing address

Carden, Frank
189 West 89th Street, Apt. 12 H
New York, NY 10024

Date or dates debt was incurred

Unknown

**Last 4 digits of account
number** _____

**Specify Code subsection of PRIORITY unsecured
claim:** 11 U.S.C. § 507(a)(7)

2.77 Priority creditor's name and mailing address

Carlson, Marvin
407 North Aurora
Ithaca, NY 14850

Date or dates debt was incurred

Unknown

Last 4 digits of account

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.78 Priority creditor's name and mailing address

Carroll, Amstice
225 West 106th Street, Apt. 16J
New York, NY 10025

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.79 Priority creditor's name and mailing address

Casella, Jean
717 Carroll St., Apt 2L
Brooklyn, NY 11215

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.80 Priority creditor's name and mailing address

Cass, Gil
350 West 51st Street, Apt. 12C
New York, NY 10019

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.81 Priority creditor's name and mailing address

Cayaba, Christopher
372 Fifth Avenue, Unit 3N
New York, NY 10018

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.82 Priority creditor's name and mailing address

Chernow, JoAnne
355 South End Avenue, Apt. 10M
New York, NY 10280

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.83 Priority creditor's name and mailing address

Chocky, Barbara
420 East 80th Street
New York, NY 10075

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.84 Priority creditor's name and mailing address

Cholakian, Rouben and Burnett, Marie
200 Cabrini Blvd. Apt.19

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

New York, NY 10033
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.85 **Priority creditor's name and mailing address**
Chopek, Stephen
68 West Pierrepont Ave
Rutherford, NJ 07070-2609
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.86 **Priority creditor's name and mailing address**
Clark, Robert
55 Payson Avenue, 6K
New York, NY 10034
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.87 **Priority creditor's name and mailing address**
Cohen, Michelle
360 1st Avenue, Apt. 14F
New York, NY 10010
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.88 **Priority creditor's name and mailing address**
Cole, Mieke
200 Riverside Boulevard, Apt. 7A
New York, NY 10069
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.89 **Priority creditor's name and mailing address**
Columbine, Vaughn
80 N Moore St # 39E
New York, NY 10013
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.90 **Priority creditor's name and mailing address**
Conheim, Susan
517 East 77th Street, Apt. 4C
New York, NY 10075
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured

☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No

claim: 11 U.S.C. § 507(a)(7)

2.91 **Priority creditor's name and mailing address**
Conover, Elaine
3 Overlook Road
New City, NY 10956
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.92 **Priority creditor's name and mailing address**
Conroy, Matthew
10 Dutcher Avenue
Pawling, NY 12564
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.93 **Priority creditor's name and mailing address**
Cooper, Sandi
905 West End Ave
New York, NY 10025
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.94 **Priority creditor's name and mailing address**
Corrado, Gregory
430 East 86th Street 14H
New York, NY 10028
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.95 **Priority creditor's name and mailing address**
Craven, Julia
316 Valley View
Pompton Plains, NJ 07444
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.96 **Priority creditor's name and mailing address**
Crimmins, Marcy
48 South Park St., #600
Montclair, NJ 0742
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.97 **Priority creditor's name and mailing address**
Crowley, Michael
25-20 37th Street
Astoria, NY 11103
Date or dates debt was incurred

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.98 Priority creditor's name and mailing address

Cubba, Therese
1600 Parker Avenue Apt. 16C
Fort Lee, NJ 07024

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.99 Priority creditor's name and mailing address

Cubbon, Judith
10 West 66 Street Apt.7A
New York, NY 10023

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.100 Priority creditor's name and mailing address

Cuff, Thomas
61 Jane Street (#19A)
New York, NY 10014

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.101 Priority creditor's name and mailing address

Curran, Mary
875 Hilldale Avenue
Berkeley, CA 94708

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.102 Priority creditor's name and mailing address

D'Ambrosi, Paul
189-15 50th Avenue
Fresh Meadows, NY 11365

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.103 Priority creditor's name and mailing address

D'Ambrosio, Vinni
11 Fifth Avenue, Apt. 3N
New York, NY 10003

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.104 Priority creditor's name and mailing address

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown \$Unknown

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Dalin, Herbert
315 Sixth Avenue, Apt 3
Brooklyn, NY 11215

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.105 Priority creditor's name and mailing address

Damm, Gene
22 Fairlawn Avenue
Albany, NY 12203

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.106 Priority creditor's name and mailing address

Daniel, Dena
20 Mews Lane
South Orange, NJ 7079

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.107 Priority creditor's name and mailing address

Dannay, Richard
50 Riverside Drive, Apt. 2C
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.108 Priority creditor's name and mailing address

Dash, Irene
161 West 16th Street, Apt. 11L
New York, NY 10011

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.109 Priority creditor's name and mailing address

Davis, Frank
129 North Fostertown Drive
Newburgh, NY 12550

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.110 Priority creditor's name and mailing address

Davis, Mary
350 West 42nd Street, Apt 59G
New York, NY 10036

Date or dates debt was incurred

Unknown

Last 4 digits of account

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.111 Priority creditor's name and mailing address

Dean, David
250 East 54th Street, Apt. 18A
New York, NY 10022

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.112 Priority creditor's name and mailing address

DeJasi, Judith
205 East 22nd Street, Apt. 4A
NY, NY 1010

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.113 Priority creditor's name and mailing address

Delroy, Stephen
68-36 108 Street, Apt. B-14
Forest Hills, NY 11375

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.114 Priority creditor's name and mailing address

Demartini, Paul
200 Rector Place, Apt. 22B
New York, NY 10280

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.115 Priority creditor's name and mailing address

Dembaugh, William
34 Clinton Avenue
New Providence, NJ 7974

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.116 Priority creditor's name and mailing address

Dennis, Thurman
16 West 16th Street, Apt. 2GN
New York, NY 10011

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.117 Priority creditor's name and mailing address

Desombre, Arnaud
208 5th Avenue, Apt. 5E

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

New York, NY 10010
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.118 **Priority creditor's name and mailing address**
Dille, Christine
1355 East 18th Street, Apt. 5F
Brooklyn, NY 11230
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.119 **Priority creditor's name and mailing address**
DiMant, Rose
400 East 56th Street, Apt. 29B
New York, NY 10022
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.120 **Priority creditor's name and mailing address**
Dorn, Jennie
2 Charlton Street, Apt. 10E
New York, NY 10014
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.121 **Priority creditor's name and mailing address**
Downs, Rebecca
307 West 78th Street
New York, NY 10024
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.122 **Priority creditor's name and mailing address**
Dubinski, Frederic
452 W47th st, Apt 4C
New York, NY 10036
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.123 **Priority creditor's name and mailing address**
Dunlap, Emily
54 Riverside Drive, Apt. 15A
New York, NY 10024
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured

☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No

claim: 11 U.S.C. § 507(a)(7)

2.124 Priority creditor's name and mailing address
Dyba, Elizabeth
45 Hamilton Avenue
Dumont, NJ 7628
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

2.125 Priority creditor's name and mailing address
Edwards, Jenny
205 East 85th Street, Apt 5Q
New York, NY 10028
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

2.126 Priority creditor's name and mailing address
Edwards, Kemerer
123 York Street, Apt 18G
New Haven, CT 6511
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

2.127 Priority creditor's name and mailing address
Elchoueri, Charles
55 Oceana Drive East, Apt. 8B
Brooklyn, NY 11235
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

2.128 Priority creditor's name and mailing address
Emmer, Rochelle
8 Stuyvesant Oval, 9B
New York, NY 10009
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

2.129 Priority creditor's name and mailing address
Epstein, Ilene
205-38 Brian Crescent
Bayside, NY 11360
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

2.130 Priority creditor's name and mailing address
Epstein, Sheila
444 East 75th Street, Apt 10G
New York, NY 10021
Date or dates debt was incurred

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.131 Priority creditor's name and mailing address

Etra, Reba
262 Central Park West, Apt 13B
New York, NY 10024

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.132 Priority creditor's name and mailing address

Fallon, Andrea
59 West 69th Street, Apt. 1R
New York, NY 10023

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.133 Priority creditor's name and mailing address

Falvo, Cathey
1325 NW 21 Terrace
Delray Beach, FL 33445

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.134 Priority creditor's name and mailing address

Farber, Betty
351 East 61st Street, Apt. 2A
New York, NY 10065

Date or dates debt was incurred

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.135 Priority creditor's name and mailing address

Farrell, Linda
245 West 107th Street, Apt. 5D
New York, NY 10025

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.136 Priority creditor's name and mailing address

Fearrington, Florence
150 East 69th Street
New York, NY 10021

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.137 Priority creditor's name and mailing address

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Feder, Janet
390 Riverside Drive, 14Fl
New York, NY 10025

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.138 Priority creditor's name and mailing address

Feliu, Alfred
44 Valley Road
New Rochelle, NY 10804

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.139 Priority creditor's name and mailing address

Ferber, Marilyn
230 East 15th Street, Apt. 5L
New York, NY 10003

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.140 Priority creditor's name and mailing address

Ferster, Bernard
125 Ramona Court
New Rochelle, NY 10804

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.141 Priority creditor's name and mailing address

Fields, Jane
11 Riverside Dr. # 2EE
New York, NY 10023-1266

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.142 Priority creditor's name and mailing address

Finnerty, Mary
80 Malvern Road
Scarsdale, NY 10583

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.143 Priority creditor's name and mailing address

Fischgrund, Regina
1334 Milanna Lane
Wantagh, NY 11793

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.144 Priority creditor's name and mailing address

Fitzpatrick, Elaine

6 Sylvan Road

Verona, NJ 7044

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.145 Priority creditor's name and mailing address

Fleckenstein, James

500 West 43rd Street, Apt. 10J

New York, NY 10036

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.146 Priority creditor's name and mailing address

Flesch, Alma

1675 York Avenue, Apt. 27D

New York, NY 10128

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.147 Priority creditor's name and mailing address

Flood, Marilyn

365 West End Avenue, Apt. 2E

New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.148 Priority creditor's name and mailing address

Florov, Margarete

4 Ethan Allen Drive

Suffern, NY 10901

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.149 Priority creditor's name and mailing address

Fonseca, Roger

1239 Lola Place

Kailua, HI 96734

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.150 Priority creditor's name and mailing address

Frank, Marshall

44 Old Lyme Road

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

Chappaqua, NY 10514
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

☒ No

2.151 **Priority creditor's name and mailing address**
French, Susan
250 West 75th Street, Apt. 6C
New York, NY 10023
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.152 **Priority creditor's name and mailing address**
Frendewey, David
330 East 38th Street, Apt. 53A
New York, NY 10016
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.153 **Priority creditor's name and mailing address**
Gabriel, H. Paul
301 East 22nd Street, Apt. 17F
New York, NY 10010
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.154 **Priority creditor's name and mailing address**
Gantly, Susan
9680 Nassau Point Road
Cutchogue, NY 11935
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.155 **Priority creditor's name and mailing address**
Garabedian, Lynnel
60 East 8th Street, Apt. 9K
New York, NY 10003
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.156 **Priority creditor's name and mailing address**
Garrett-Goodyear, Harold
31 Woodbridge Ter
South Hadley, MA 1075
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured

claim: 11 U.S.C. § 507(a)(7)

2.157 Priority creditor's name and mailing addressgarron, laurel
330 East 70th Street, Apt. 2A
New York, NY 10021

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.158** Priority creditor's name and mailing addressGeffken, Dorothea
148-B Edgewater Park
Bronx, NY 10465-3549

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.159** Priority creditor's name and mailing addressGeller, Carolyn
400 East 56th Street, Apt. 29D
New York, NY 10022

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.160** Priority creditor's name and mailing addressGermack, Barbara
9411 Shore Road, Apt. 5E
Brooklyn, NY 11209

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.161** Priority creditor's name and mailing addressGettler, Paul
248 Centre Avenue, Apt. 6B
New Rochelle, NY 10805

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.162** Priority creditor's name and mailing addressGlasser, Alan
4 Sheffield Drive
Manalapan, NJ 7726

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.163** Priority creditor's name and mailing addressGluck, Susan
14 Horatio Street Apt. 9A
New York, NY 10014

Date or dates debt was incurred

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.164** Priority creditor's name and mailing addressGold, Stella303 West 66th Street, Apt. 12HENew York, NY 10023

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.165** Priority creditor's name and mailing addressGoldenthal, Stephanie21 East 22nd Street, Apt. 5FNew York, NY 10010

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.166** Priority creditor's name and mailing addressGonzalez, Daniel110 Riverside Drive, Apt. 16BNew York, NY 10024

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.167** Priority creditor's name and mailing addressGoodman, Marianne215 East 80th Street, Apt. 5DNew York, NY 10075

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.168** Priority creditor's name and mailing addressGordon, Joyce110 Livingston St 6EBrooklyn, NY 11201

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.169** Priority creditor's name and mailing addressGordon, Judith155 East 76th Street, Apt. 12DNew York, NY 10021

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.170** Priority creditor's name and mailing address

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Debtor The Pearl Theatre Company, Inc.
Name _____

Case number (if known) 17-11572 (SHL)

Gordon, Richard
365 West End Ave. apt. 704
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.171 Priority creditor's name and mailing address

Gorelik, Lyubov
2145 77th Street
Brooklyn, NY 11214

Date or dates debt was incurred

Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.172 Priority creditor's name and mailing address

Gorelik, Minette
365 West 25th Street, Apt. 10B
New York, NY 10001

Date or dates debt was incurred

Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.173 Priority creditor's name and mailing address

Gottlieb, Sam
24 Port Imperial Avenue, Apt. 418
West New York, NY 7093

Date or dates debt was incurred

Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.174 Priority creditor's name and mailing address

Gotts, Michael
50 W. 87th Street, #1
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.175 Priority creditor's name and mailing address

Grabelsky, Rose
16 Nassau Drive
Great Neck, NY 11021

Date or dates debt was incurred

Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.176 Priority creditor's name and mailing address

Greenberg, Frances
501 East 79th Street
New York, NY 10021

Date or dates debt was incurred

Unknown

Last 4 digits of account

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

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☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.177 Priority creditor's name and mailing address

Greenberg, Nancy
220 East 73rd Street, Apt 4C
New York, NY 10021

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.178 Priority creditor's name and mailing address

Greeney, Laura
294 11 Street
Brooklyn, NY 11215

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.179 Priority creditor's name and mailing address

Greenhall, Kenneth
3840 Greystone Avenue
Bronx, NY 10463

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.180 Priority creditor's name and mailing address

Greweldinger, Jutta
108 Lake Road
Demarest, NJ 7627

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.181 Priority creditor's name and mailing address

Gross, Margaret
15 Elm Court Way
West Orange, NJ 7052

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.182 Priority creditor's name and mailing address

Grossner, Carolyn
400 East 85th Street, Apt. 12L
New York, NY 10028

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.183 Priority creditor's name and mailing address

Grundl, Peter
7607 Walton Lane

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

Annandale, VA 22003
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.184 **Priority creditor's name and mailing address**
Gunhouse, Robert
173 Summit Avenue
Summit, NJ 7901
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.185 **Priority creditor's name and mailing address**
Haac, Gunilla
138 East 36th Street, Apt. 9C
New York, NY 10016
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.186 **Priority creditor's name and mailing address**
Haas, Pia
8 Guilford Circle
Goldens Bridge, NY 10526
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.187 **Priority creditor's name and mailing address**
Haber, Zelda
40 East 9th Street, Apt. 5M
New York, NY 10003
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.188 **Priority creditor's name and mailing address**
Hall, Nancy
69 West 9th Street, Apt. 11B
New York, NY 10011
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.189 **Priority creditor's name and mailing address**
Halligan-Luca, Anne
365 Bridge Street, Apt. 18 E
Brooklyn, NY 11201
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured

☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No

claim: 11 U.S.C. § 507(a)(7)

2.190 Priority creditor's name and mailing addressHalper, Frances
137 East 36th Street, Apt. 15K
New York, NY 10016

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.191 Priority creditor's name and mailing address**Hamilton, Henry
111 Woodburn Rd
Pinehurst, NC 28374

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.192 Priority creditor's name and mailing address**Hamilton, Jo
71 Jane Street
New York, NY 10014

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.193 Priority creditor's name and mailing address**Hamilton, Russel
340 East 93rd Street, Apt. 6E
New York, NY 10128

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.194 Priority creditor's name and mailing address**Hammock, Marlene
115 9th Avenue South Unit 901
Jacksonville Beach, FL 32250

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.195 Priority creditor's name and mailing address**Hanway, Raymond
4030 Maywood Drive
Seaford, NY 11783

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes**2.196 Priority creditor's name and mailing address**Hardy, Joseph
101 West End Avenue, Apt 11HH
New York, New York 10023

Date or dates debt was incurred

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.197 Priority creditor's name and mailing address
Harritan, Mary
170 West End Avenue, Apt. 23D
New York, NY 10023
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.198 Priority creditor's name and mailing address
Hartl, Gerda
4 Horizon Road, G-05
Fort Lee, NJ 7024
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.199 Priority creditor's name and mailing address
Hartmann, Karen
176 Grey Rock Road
Southbury, CT 6488
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.200 Priority creditor's name and mailing address
Hayduk, Linda
25 Canterbury Rd., Apt. 3E
Great Neck, NY 11021
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.201 Priority creditor's name and mailing address
Headley, Carol
20 West 72nd Street, Apt. 1406
New York, NY 10023
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.202 Priority creditor's name and mailing address
Hedge, Joanna
170 Hawthorne Street, Apt. 5C
Brooklyn, NY 11225
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.203 Priority creditor's name and mailing address

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund
Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Helburn, Amy
67 Walk Hill Street
Boston, MA 2130

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.204 Priority creditor's name and mailing address

Held, James
7140 112th Street, Apt. 509
Forest Hills, NY 11375

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.205 Priority creditor's name and mailing address

Hendrickson, Virginia
28 East 73rd Street
New York, NY 10021

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.206 Priority creditor's name and mailing address

Henry, Mario
146-03 61st Road
Flushing, NY 11367

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.207 Priority creditor's name and mailing address

Heyman, Wendy
628 East 20th Street, Apt. 8E
New York, NY 10019

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.208 Priority creditor's name and mailing address

Hiepler, Dan
326 Prospect Avenue, Apt. 2A
Hackensack, NJ 7601

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.209 Priority creditor's name and mailing address

Hill, Judith
67 Park Ave., Apt. 11AB
New York, NY 10016

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.210 Priority creditor's name and mailing address

Hirsch, Ellen
14 Sutton Place South
New York, NY 10022

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.211 Priority creditor's name and mailing address

Hochberg, Susan
108 W. 15th St. #3D
New York, NY 10011

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.212 Priority creditor's name and mailing address

Hodges, Eleanor
340 East 72nd Street, Apt. 4N
New York, NY 10021

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.213 Priority creditor's name and mailing address

Hodges, Fletcher
755 West End Avenue, Apt. 5A
New York, NY 10025

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.214 Priority creditor's name and mailing address

Hoffman, Carol
470 Halstead Avenue, Apt. 1A
Harrison, NY 10528

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.215 Priority creditor's name and mailing address

Holman, Maureen
325 lexington, apt. 9a
new york, NY 10016

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.216 Priority creditor's name and mailing address

Holzman, Robert
2155 34th Ave Apt 14C

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

Astoria, NY 11106

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.217 Priority creditor's name and mailing address

Hopkins Tanne, Janice

251 Central Park West

New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.218 Priority creditor's name and mailing address

Howard, Carl

290 Broadway

NY, NY 10007

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.219 Priority creditor's name and mailing address

Howard, Marian

735 Ladd Road

NY, NY 10471

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.220 Priority creditor's name and mailing address

hreich99@rcn.com,

1851 7th Avenue, Apt. 21

New York, NY 10026

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.221 Priority creditor's name and mailing address

Hug, Charles

2 12th Street, Apt. 1101

Hoboken, NJ 7030

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.222 Priority creditor's name and mailing address

Hughes, Julie

180 West End Avenue

New York, NY 10023-4902

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

claim: 11 U.S.C. § 507(a)(7)

2.223 Priority creditor's name and mailing addressInge, Laura
25 West 54 Street
New York, NY 10019

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

2.224 Priority creditor's name and mailing addressIshofsky, Harvey
15 Parkside Drive
Great Neck, NY 11021

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

2.225 Priority creditor's name and mailing addressJackman, Nancy
130 East 18th Street, Apt. 12N
New York, NY 10003

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

2.226 Priority creditor's name and mailing addressJackson, Pamela
685 West End Avenue
New York, NY 10025

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

2.227 Priority creditor's name and mailing addressJacobs, Judy
8 Park Trail
Croton-on-Hudson, NY 10520

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

2.228 Priority creditor's name and mailing addressJacobsohn, Gale
12701 Shaker Boulevard, Apt. 801
Cleveland, OH 44120

Date or dates debt was incurred

UnknownLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

2.229 Priority creditor's name and mailing addressJakobson, Ellen
1025 Fifth Avenue, Apt. 12EN
New York, NY 10028

Date or dates debt was incurred

☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.230 Priority creditor's name and mailing address
Jalbert-Gagnier, David
417 Ocean Avenue, Apt C1
Brooklyn, NY 11226
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.231 Priority creditor's name and mailing address
Jambois, Thomas
210 Lincoln Road
Brooklyn, NY 11225
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.232 Priority creditor's name and mailing address
Janik, Rob
9 Dorset Street
Boston, MA 2125
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.233 Priority creditor's name and mailing address
Janove, Michael
567 48th Street
Brooklyn, NY 11220
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.234 Priority creditor's name and mailing address
Juhase, Kim
38 Whitney Road
Short Hills, NJ 7078
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.235 Priority creditor's name and mailing address
Kahn, Betty
798 Carroll Street
Brooklyn, NY 11215
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.236 Priority creditor's name and mailing address

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Kaplan, Stanley
151 West 86th Street, Apt. 1C
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.237 Priority creditor's name and mailing address

Katz, Adrienne
315 West 70th St, Apt 9K
New York, NY 10023

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.238 Priority creditor's name and mailing address

Katz, Eleanor
315 8th Avenue, Apt. 18B
New York, NY 10001

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.239 Priority creditor's name and mailing address

Katz, Helaine
140 West End Avenue, Apt. 5G
New York, NY 10023

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.240 Priority creditor's name and mailing address

Kaufman, Geraldine
1600 Parker Avenue, Apt. 1E
Fort Lee, NJ 7024

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.241 Priority creditor's name and mailing address

Kaufman, Ruth
113 Sterling Place, Apt. 7
Brooklyn, NY 11217

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.242 Priority creditor's name and mailing address

Kellock, Sally
393 Martling Ave.
Tarrytown, NY 10591

Date or dates debt was incurred

Unknown

Last 4 digits of account

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

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☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

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☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

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As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

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☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.243 Priority creditor's name and mailing address

Kelly, Gwen
465 West 23rd Street, Apt. 4A
New York, NY 10011

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.244 Priority creditor's name and mailing address

Kelly, Sarah
425 Riverside Drive, Apt. 13A
New York, NY 10025

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.245 Priority creditor's name and mailing address

Kelsey, Richard
23-10 38th Street, Apt. 1
Long Island City, NY 11105

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.246 Priority creditor's name and mailing address

Kingsley, Peter
211 York Street
Jersey City, NJ 7302

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.247 Priority creditor's name and mailing address

Kiok, Joan
442 East 20th Street, Apt. 9H
New York, NY 10009

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.248 Priority creditor's name and mailing address

Kirschbaum, Marilyn
33 Aerie Court
Manhasset, NY 11030

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.249 Priority creditor's name and mailing address

Kissane, Joseph
161 West 16th Street, Apt 15J

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

New York, NY 10011
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.250 **Priority creditor's name and mailing address**
Klein, Eric
2373 Broadway Apt. 829
New York, NY 10024
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.251 **Priority creditor's name and mailing address**
Klein, Robert
15 Round A Bend Road.
Tarrytown, NY 10591
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.252 **Priority creditor's name and mailing address**
Klopper, Ulrike
74 West 68th Street, 3A
New York, NY 10023-6049
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.253 **Priority creditor's name and mailing address**
Knibb, Joan
485 Lenox Avenue, Apt. 9C
New York, NY 10037
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.254 **Priority creditor's name and mailing address**
Knott, Robert
708 Jersey Ave, Apt 6C
Jersey City, NJ 7302
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.255 **Priority creditor's name and mailing address**
Knutson, Andrea
618 6th Street
Brooklyn, NY 11215
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured

☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?
☒ No

claim: 11 U.S.C. § 507(a)(7)

2.256 Priority creditor's name and mailing address
Koltun, Maryann
294 Bedford Rd
Pleasantville, NY -
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

☐ YesAs of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.257 Priority creditor's name and mailing address
Komson, Richard
10 West 66th St. Apt. 8K
New York, NY 10023
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.258 Priority creditor's name and mailing address
Konort, Marlise
90 Morris Avenue
Haworth, NJ 7641
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.259 Priority creditor's name and mailing address
Kooden, Harold
306 West 90th Street, Apt. 4
New York, NY 10024
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.260 Priority creditor's name and mailing address
Koreto, Paul
500 East 85th St 10-H
New York, NY 10028
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.261 Priority creditor's name and mailing address
Koros, Robert
58 Normandy Drive
Westfield, NJ 7090
Date or dates debt was incurred
Unknown
Last 4 digits of account
number
Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

2.262 Priority creditor's name and mailing address
Koslow, Michael
180 West End Avenue, Apt. 7N
New York, NY 10023
Date or dates debt was incurred

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.☐ Contingent
☐ Unliquidated
☐ Disputed

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.263 Priority creditor's name and mailing address

Kovacs, Brian
1800 Mineral Spring Ave #260
North Providence, RI 02904

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.264 Priority creditor's name and mailing address

Krasnoff, Arlene
217-07 82nd Avenue
Hollis Hills, NY 11427

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.265 Priority creditor's name and mailing address

Kronick, Albert
35 Prospect Park West, Penthouse B
Brooklyn, NY 11215

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.266 Priority creditor's name and mailing address

Krouse, Carolyn
200 East 57th Street, Apt. 12F
New York, NY 10022

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.267 Priority creditor's name and mailing address

Kupferman, Fran
140 East 72nd Street
New York, NY 10021

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.268 Priority creditor's name and mailing address

Kurz, Yangnim
9 East 96th Street, Apt. 2C
New York, NY 10128

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.269 Priority creditor's name and mailing address

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Kyriakides, Miranda
68-36 108th Street, Apt. A67
Forest Hills, NY 11375

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.270 Priority creditor's name and mailing address

La Due, Annette
3777 Independence Avenue, Apt. 4B
Bronx, NY 10463

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.271 Priority creditor's name and mailing address

Laity, Mary
29 Gordon Way
Princeton, NJ 8540

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.272 Priority creditor's name and mailing address

Laity, Susan
151 Fourth Avenue
Milford, CT 6460

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.273 Priority creditor's name and mailing address

LaManna, Maryann
560 7th Avenue, Apt 6B
Brooklyn, NY 11215

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.274 Priority creditor's name and mailing address

Landesman, Arlyne
311 East 71st Street, Apt. 4C
New York, NY 10021

Date or dates debt was incurred

Unknown

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.275 Priority creditor's name and mailing address

Landis, Janis
68-28 Exeter Street
Forest Hills, NY 11375

Date or dates debt was incurred

Unknown

Last 4 digits of account

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.276 Priority creditor's name and mailing address

Landon, Judith
247 W. 87th ST
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.277 Priority creditor's name and mailing address

Lane, Authur
245 East 87th Street 9D
New York, NY 10128

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.278 Priority creditor's name and mailing address

Lederman, Michael
111 Overlook Road
Pomona, NY 10970

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.279 Priority creditor's name and mailing address

Leffler, Susan
100 East Hartsdale Avenue, Apt. 4BE
Hartsdale, NY 10530

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.280 Priority creditor's name and mailing address

Lehrer, Harris
230 West 55th Street, Apt. 23C
New York, NY 10019

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.281 Priority creditor's name and mailing address

Leiman-Carbia, Julius
625 3rd Street
Brooklyn, NY 11215

Date or dates debt was incurred

Unknown

Last 4 digits of account

number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.282 Priority creditor's name and mailing address

Leissner, Amy
64 W. 108 St., 1E

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

New York, NY 10025
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.283 **Priority creditor's name and mailing address**
Lenti, Frank
28 Tappentown Lane
Brookville, NY 11545
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.284 **Priority creditor's name and mailing address**
Leonard, Christiana
549 W 123rd Street, Apt. 14G
New York, NY 10027
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.285 **Priority creditor's name and mailing address**
Leonard, Jessica
755 East Mountain Road South
Coldspring, NY 10516
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.286 **Priority creditor's name and mailing address**
Leopold, Robert
67 Palmer Drive
Livingston, NJ 7039
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.287 **Priority creditor's name and mailing address**
Levinson, Gary
555 West 42nd Street
New York, NY 10036
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Levitt, Lawrence
15 Minor Court
West Nyack, NY 10994
Date or dates debt was incurred
Unknown
Last 4 digits of account number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$9,306.92 \$9,306.92

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Salary and Reimbursement

Is the claim subject to offset?

☒ No

☐ Yes

Check all that apply. \$Unknown \$Unknown

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.289	Priority creditor's name and mailing address <u>Levitt, Michael</u> <u>175 West 72nd Street, Apt. 10F</u> <u>New York, NY 10023</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.290	Priority creditor's name and mailing address <u>Levy, Joan</u> <u>1600 Parker Avenue, Apt. 3G</u> <u>Fort Lee, NJ 7024</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.291	Priority creditor's name and mailing address <u>Lewis, Marjorie</u> <u>720 Lenox Avenue, Apt.27D</u> <u>New York, NY 10039</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.292	Priority creditor's name and mailing address <u>Lidsky, Ora</u> <u>173 Beaumont Street</u> <u>Brooklyn, NY 11235</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.293	Priority creditor's name and mailing address <u>Lieberman, Dorothy</u> <u>185 East 85th Street, Apt. 36C</u> <u>New York, NY 10028</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.294	Priority creditor's name and mailing address <u>Light, Geraldine</u> <u>400 East 85th Street, Apt 5H</u> <u>New York, NY 10028</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.295	Priority creditor's name and mailing address <u>Lilien, Georgiana</u> <u>70 East 96th Street, Apt. 3B</u> <u>New York, NY 10128</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	\$ <u>Unknown</u>	\$ <u>Unknown</u>

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.296 Priority creditor's name and mailing address

Limb, Young
355 Route 111 unit 24
Smithtown, NY 11787

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.297 Priority creditor's name and mailing address

Lipsitz, Lawrence
1147 Trafalgar Street
Teaneck, NJ 7666

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.298 Priority creditor's name and mailing address

Lipson, Enoch
61-21 Broadway
Woodside, NY 11377

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.299 Priority creditor's name and mailing address

Los Blancos
683 10th Street
Brooklyn, NY 11215

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.300 Priority creditor's name and mailing address

Lucas, Dayna
121 Breckenridge Place
Chapel Hill, NC 27514

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.301 Priority creditor's name and mailing address

Lundin, Margaret
70 Park Terrace West, Apt. E12
New York, NY 10034

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.302 Priority creditor's name and mailing address

Lyon, Kenneth

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:
Check all that apply.

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

\$Unknown \$Unknown

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

311 E 92ndSt, 3E
New York, NY 10128
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.303 Priority creditor's name and mailing address
Maayan, Morelly
One Lincoln Place, Apt. 32TU
New York, NY 10023
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.304 Priority creditor's name and mailing address
Machemer, Corona
200 Cabrini Boulevard, Apt. 18
New York, NY 10033
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.305 Priority creditor's name and mailing address
Maclean, Rebecca
1 Bay Club Drive
Bayside, NY 11260
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.306 Priority creditor's name and mailing address
Maher, Jean
155 Wellington Road
Garden City, NY 11530
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.307 Priority creditor's name and mailing address
Maidman, Richard
Townhouse Management Company
New York, NY 10022-3222
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.308 Priority creditor's name and mailing address
70 East 55th Street
,
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒ No
☐ Yes

2.309 Priority creditor's name and mailing address
Malcolm, Marian
99 Oxford Drive
Tenafly, NJ 7670

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
Unknown

Basis for the claim:
Ticket Refund

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.310 Priority creditor's name and mailing address
Maldonado, Rachel
3121 Middletown Road #1C
Bronx, NY 10461

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
Unknown

Basis for the claim:
Ticket Refund

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.311 Priority creditor's name and mailing address
Malinowski, Halina
66 Nancy Ct
Staten Island, NY 10306

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
Unknown

Basis for the claim:
Ticket Refund

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.312 Priority creditor's name and mailing address
Malizia, Patrick
1378 Kearney Avenue
Bronx, NY 10465

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
Unknown

Basis for the claim:
Ticket Refund

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.313 Priority creditor's name and mailing address
Mani, Subbiah
201 East 28th Street, Apt. 4A
New York, NY 10016

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
Unknown

Basis for the claim:
Ticket Refund

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.314 Priority creditor's name and mailing address
Marcus, Alice
55 Grasslands Road, Apt. C245
Valhalla, NY 10595

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
Unknown

Basis for the claim:
Ticket Refund

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

2.315 Priority creditor's name and mailing address
Margolin, Estelle
98-10 64 Ave -7J
Rego Park, NY 11374

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.316 Priority creditor's name and mailing address

Marino, George
30 West 63rd St Apt 3u
New York, NY 10023

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.317 Priority creditor's name and mailing address

Markowitz, Geri
1500 Palisade Avenue, Apt. 26C
Fort Lee, NJ 7024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.318 Priority creditor's name and mailing address

Marks, Alfred
242 East 72nd Street, Apt. 2C
New York, NY 10021

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.319 Priority creditor's name and mailing address

Marrone, Frank
15 Old Rock Road
Weston, CT 6883

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.320 Priority creditor's name and mailing address

Marshall, Michael
60 Riverside Blvd., Apt 607
New York, NY 10069-0208

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.321 Priority creditor's name and mailing address

Marzola, Eileen
124 West 72nd Street, Apartment 10B
New York, NY 10023

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.322 Priority creditor's name and mailing address <u>Mattson, Marlin</u> <u>324 East 112th Street Apt. 6B</u> <u>New York, NY 10029</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.323 Priority creditor's name and mailing address <u>Maus, Vincent</u> <u>43 Stratford Road</u> <u>West Hempstead, NY 11552</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.324 Priority creditor's name and mailing address <u>May, Maura</u> <u>47 Calumet Avenue</u> <u>Hastings on Hudson, NY 10706</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.325 Priority creditor's name and mailing address <u>Mayer, Jerome</u> <u>70 East 10th Street, Apt. 10V</u> <u>New York, NY 10003</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.326 Priority creditor's name and mailing address <u>Maziekien, Michael</u> <u>445 Morris Avenue, Apt. B7</u> <u>Springfield, NJ 7081</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.327 Priority creditor's name and mailing address <u>McCann, Christine</u> <u>134 East 93rd Street, Apt 7C</u> <u>New York, NY 10128</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.328 Priority creditor's name and mailing address <u>McDonald, James</u> <u>29 Charles Street, Apt. 5F</u> <u>New York, NY 10014</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:

Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.329** Priority creditor's name and mailing addressMcGuire, Carolyn9201 Shore Road, Apt. B705Brooklyn, NY 11209

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.330** Priority creditor's name and mailing addressMcIntosh, John110 West 86th Street, Apt. 7BNew York, NY 10024

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.331** Priority creditor's name and mailing addressMcKee, Laurel205 West End Avenue, Apt. 23PNew York, NY 10023

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.332** Priority creditor's name and mailing addressMcKinley, Leslie40 Prospect Park West, Apt. 3HBrooklyn, NY 11215

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.333** Priority creditor's name and mailing addressMeeks, Helen4 Park Avenue, Apt. 8UNew York, NY 10016

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.334** Priority creditor's name and mailing addressMeltzer, Phyllis15 Valentine DriveAlbertson, NY 11507

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.335** Priority creditor's name and mailing addressMenichino, SusanTicket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

260 Avenue P
Brooklyn, NY 11204
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.336 **Priority creditor's name and mailing address**
Messineo, Carol
10 8th Avenue, Apt. 5
Brooklyn, NY 11217
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.337 **Priority creditor's name and mailing address**
Meyer, Edward
16 Spring House Lane
Morristown, NJ 7960
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.338 **Priority creditor's name and mailing address**
Migani, Raffaella
120 Nyac Avenue
Pelham, NY 10803
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.339 **Priority creditor's name and mailing address**
Milberg, Francis
150 East 56th Street, Apt. 6D
New York, NY 10022
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.340 **Priority creditor's name and mailing address**
Miller, Andra
517 West 46th Street, Apt. 504
New York, NY 10036
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.341 **Priority creditor's name and mailing address**
Miller, Charles
129 firestone circle
Roslyn, NY 11576
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒
- No
-
- ☐
- Yes

2.342 Priority creditor's name and mailing addressMiller, Renee
144 East 84th Street, Apt. 4E
New York, NY 10028Date or dates debt was incurred
UnknownLast 4 digits of account
number Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown**2.343** Priority creditor's name and mailing addressMines, Joan
70 Maine Avenue, Unit 70-21
Rockville Centre, NY 11570Date or dates debt was incurred
UnknownLast 4 digits of account
number Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown**2.344** Priority creditor's name and mailing addressMittleman, Sondra
74 George Street
Harrington Park, NJ 7640Date or dates debt was incurred
UnknownLast 4 digits of account
number Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown**2.345** Priority creditor's name and mailing addressMitzner, Judith
145 Glennlawn Avenue
Seacliff, NY 11579Date or dates debt was incurred
UnknownLast 4 digits of account
number Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown**2.346** Priority creditor's name and mailing addressModell, Esther
130 Morningside Drive, Apt 2A
New York, NY 10027-6006Date or dates debt was incurred
UnknownLast 4 digits of account
number Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown**2.347** Priority creditor's name and mailing addressMonyak, Carol
146 Linden Street
Rockville Centre, NY 11570Date or dates debt was incurred
UnknownLast 4 digits of account
number Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown**2.348** Priority creditor's name and mailing addressMoore, Kathleen
116 Pinehurst Avenue, E-14
New York, NY 10033As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.349 Priority creditor's name and mailing address

Moriber, Terry
333 McDonald Avenue, Apt. 6N
Brooklyn, NY 11218-2238

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.350 Priority creditor's name and mailing address

Morra, Frank
165 East 32nd Street, Apt. 14C
New York, NY 10016

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.351 Priority creditor's name and mailing address

Morrell, Rhoda
45 West 60th Street, Apt. 18E
New York, NY 10023

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.352 Priority creditor's name and mailing address

Morris, Anne-Marie
15 West 81st Street, Penthouse A
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.353 Priority creditor's name and mailing address

Mosedale, John
43 West 93rd Street, Apt. 21
New York, NY 10025

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.354 Priority creditor's name and mailing address

Moskowitz, David
40 Clinton Street, Apt. 6G
Brooklyn, NY 11201

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.355	Priority creditor's name and mailing address <u>Murray, Phyllis</u> <u>18 Stuyvesant Oval Apt. 5B</u> <u>New York, NY 10009</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.356	Priority creditor's name and mailing address <u>Nelson, Anders</u> <u>80 Dundee Lane</u> <u>Barrington Hills, IL 60010</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.357	Priority creditor's name and mailing address <u>Nelson, Dorothy</u> <u>3 Washington Square Village, Apt. 11-0</u> <u>New York, NY 10012</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.358	Priority creditor's name and mailing address <u>Nelson, Lee</u> <u>161 West 75th Street, Apt. 1C</u> <u>New York, NY 10023</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.359	Priority creditor's name and mailing address <u>Neuls-Bates, Carol</u> <u>2 Fifth Avenue, Apt. 20U</u> <u>New York, NY 10011</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.360	Priority creditor's name and mailing address <u>Newkirk, Roy</u> <u>145 West 71st Street, Apt. 3C</u> <u>New York, NY 10023</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.361	Priority creditor's name and mailing address <u>Newman, Roberta and Stanley</u> <u>3094 Shore Road</u> <u>Bellmore, NY 11710</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.362 Priority creditor's name and mailing address

Newman, Sharon
25 Pheasant Lane
Woodbury, NY 11797

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.363 Priority creditor's name and mailing address

Nicholson, Betty
43 Hampton Place, Apt 10C
Freeport, NY 11520

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.364 Priority creditor's name and mailing address

Nissen, Myra
1215 Fifth Avenue, Apt. 15C
New York, NY 10029

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.365 Priority creditor's name and mailing address

Norman, Jane
155 East 31st Street, Apt. 5G
New York, NY 10016

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.366 Priority creditor's name and mailing address

Novo, Laura
2075 1st Avenue, Apt. 11E
New York, NY 10029

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.367 Priority creditor's name and mailing address

O'Neill, James
189 Davis Road
Salt Point, NY 12578

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.368 Priority creditor's name and mailing address

O'shaughnessy, Carol

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

7502 Ridge Blvd. Apt. F10
Brooklyn, NY 11209
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.369 **Priority creditor's name and mailing address**
OBrien, Kathleen
435 Sked St.
Pennington, NJ 8534
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.370 **Priority creditor's name and mailing address**
Ofer, Abraham
154 Farrington Avenue
Sleepy Hollow, NY 10591
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.371 **Priority creditor's name and mailing address**
Ogman, Lila
42 Woodcut Lane, Woodcut Lane
New Rochelle, NY 10804
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.372 **Priority creditor's name and mailing address**
Ogum, Leslie
206 Quentin Road, Apt. 2C
Brooklyn, NY 11223
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.373 **Priority creditor's name and mailing address**
Ortiz, Miguel
516 7th Street
Brooklyn, NY 11215
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.374 **Priority creditor's name and mailing address**
Orton, Graham
23 City Place
White Plains, NY 10601
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒
- No
-
- ☐
- Yes

2.375 **Priority creditor's name and mailing address**
Ottesen, Elizabeth
39 Bordeaux Drive
Parsippany, NJ 7054**Date or dates debt was incurred**
Unknown**Last 4 digits of account number** _____Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund**Is the claim subject to offset?**

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.376 **Priority creditor's name and mailing address**
Padawer, Lois
729 Kathleen Place, 2nd Floor
Brooklyn, NY 11235**Date or dates debt was incurred**
Unknown**Last 4 digits of account number** _____Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund**Is the claim subject to offset?**

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.377 **Priority creditor's name and mailing address**
Paine, Fredericka
140 East 83rd Street, Apt. 8E
New York, NY 10028**Date or dates debt was incurred**
Unknown**Last 4 digits of account number** _____Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund**Is the claim subject to offset?**

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.378 **Priority creditor's name and mailing address**
Pasternack, Cheryl
83-33 Austin Street
Kew Gardens, NY 11415**Date or dates debt was incurred**
Unknown**Last 4 digits of account number** _____Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund**Is the claim subject to offset?**

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.379 **Priority creditor's name and mailing address**
Pazer, Perry
50 Sutton Place South, PH B
New York, NY 10022**Date or dates debt was incurred**
Unknown**Last 4 digits of account number** _____Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund**Is the claim subject to offset?**

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.380 **Priority creditor's name and mailing address**
Peck, Harvey
60 Armour Road
Mahwah, NJ 7430**Date or dates debt was incurred**
Unknown**Last 4 digits of account number** _____Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund**Is the claim subject to offset?**

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.381 **Priority creditor's name and mailing address**
Penso, Suzan
730 Columbus Avenue, Apt 51
New York, NY 10025**As of the petition filing date, the claim is:**
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.382 Priority creditor's name and mailing address

Pepper, Bert
Kendall on Hudson, #4006
Sleepy Hollow, NY 10591

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.383 Priority creditor's name and mailing address

Perkus, Paul
330 West 28th Street, Apt. 9A
New York, NY 10001

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.384 Priority creditor's name and mailing address

Peters, Patricia
444 West 49 Street, #S3
new york, NY 10019

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.385 Priority creditor's name and mailing address

Petersen, Teresa
7427 Boulevard East, Apt. 34
North Bergen, NJ 7047

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.386 Priority creditor's name and mailing address

Petrova, Simona
27 East 65th Street, Apt. 4F
New York, NY 10065

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.387 Priority creditor's name and mailing address

Petzenbaum, Hannah
345 West 55th Street, Apt. 6B
New York, NY 10019

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.388	Priority creditor's name and mailing address <u>Pfister, William</u> <u>16 Saint Marks Place, Apt. 5C</u> <u>New York, NY 10003</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.389	Priority creditor's name and mailing address <u>Piskin, Lorraine</u> <u>2673 Francis Street</u> <u>Bellmore, NY 11710</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.390	Priority creditor's name and mailing address <u>Podell, Albert</u> <u>110 Sullivan Street, Apt. 5G</u> <u>New York, NY 10012</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.391	Priority creditor's name and mailing address <u>Pollinger, Arline</u> <u>3030 Ocean Avenue, Apt 6C</u> <u>Brooklyn, NY 11235-3337</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.392	Priority creditor's name and mailing address <u>Pop, Anca</u> <u>7081 Ivy Leaf Drive #204</u> <u>Germantown, TN 38138</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.393	Priority creditor's name and mailing address <u>Prechter, Diana</u> <u>2000 South Congress Ave.</u> <u>Austin, TX 78704</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.394	Priority creditor's name and mailing address <u>Randall, Francis</u> <u>425 Riverside Drive, Apt. 10-I</u> <u>New York, NY 10025</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.395 Priority creditor's name and mailing address

Raush, Fran
35 Radstock Avenue
Valley Stream, NY 11580

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.396 Priority creditor's name and mailing address

Raymo, Judith
50 East 79th Street, Apt.4C
New York, NY 10075

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.397 Priority creditor's name and mailing address

Reardon, Betty
80 LaSalle Street Apt. 17D
New York, NY 10027

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.398 Priority creditor's name and mailing address

Rebello, David
100 Belmont Place, Apt. 3E
Staten Island, NY 10301

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.399 Priority creditor's name and mailing address

Reilly, John
324 East 77th Street, Apt. 4B
New York, NY 10075

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.400 Priority creditor's name and mailing address

Reiss, Richard
107 Saint Marks Avenue
Brooklyn, NY 11217

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.401 Priority creditor's name and mailing address

Rexing, Hildegard

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

222 Martling Avenue
Tarrytown, NY 10591
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.402 **Priority creditor's name and mailing address**
Richards, David A.J.
60 Riverside Drive, Apt. 8G
New York City, NY 10024
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.403 **Priority creditor's name and mailing address**
Rivera, Julio
200 Rector Place, Apt. 8A
New York, NY 10280
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.404 **Priority creditor's name and mailing address**
Rose, Arthur
1500 Palisades Avenue, Apt. 5D
Fort Lee, NJ 7024
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.405 **Priority creditor's name and mailing address**
Rose, Walter
137 East 36th Street, Apt. 18G
New York, NY 10016
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.406 **Priority creditor's name and mailing address**
Rosen, Barbara
895 West End Avenue, Apt. 3-B
New York, NY 10025
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.407 **Priority creditor's name and mailing address**
Rosenbaum, Judith
570 Westminster Road, Apt B10
Brooklyn, NY 11230
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒
- No
-
- ☐
- Yes

2.408 Priority creditor's name and mailing address
Rosenberg, Barbara
42 Kenneth Road
Hartsdale, NY 10530Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.409 Priority creditor's name and mailing address
rosenn, barak
523 harbor place
west new york, NJ 7093Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.410 Priority creditor's name and mailing address
Ross, Paulette
40 Prospect Street
Nyack, NY 10960Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.411 Priority creditor's name and mailing address
Rossi, Rosalind
2 Tudor City Place, Apt. 4js
New York, NY 10017-6824Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.412 Priority creditor's name and mailing address
Rost, Maria
15 Towers Street
Jersey City, NJ 7305Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.413 Priority creditor's name and mailing address
Rothberg, Judith
1 Cedar Lane
Glen Cove, NY 11542Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.414 Priority creditor's name and mailing address
Rothenberg, Marian
48 South Park Street, Unit 314
Montclair, NJ 7042As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.415 Priority creditor's name and mailing address

Ruane, Mary
2 Horizon Road, Apt. 1217
Fort Lee, NJ 7024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.416 Priority creditor's name and mailing address

Rubenstein, Denise
470 Highview Road
Englewood, NJ 7631

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.417 Priority creditor's name and mailing address

Rubin, Enid
262 Central Park West Apt. 10B
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.418 Priority creditor's name and mailing address

Rubin, Seymour
1088 Park Avenue, Apt. 14F
New York, NY 10128

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.419 Priority creditor's name and mailing address

Ryan, Elizabeth
225 West 12th Street, Apt 6-C
New York, NY 10011

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.420 Priority creditor's name and mailing address

Ryan, Joan
25 Central Park West, Apt. 11Q
New York, NY 10023

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.421	Priority creditor's name and mailing address <u>Ryan, Michael</u> <u>109-20 Queens Blvd. #2D</u> <u>Forest Hills, NY 11375</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.422	Priority creditor's name and mailing address <u>Santilli, Sandra</u> <u>212 East 47th Street, Apt 10J</u> <u>New York, NY 10017</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.423	Priority creditor's name and mailing address <u>Saslow, Annette</u> <u>1603 Greenway</u> <u>Woodbury, NY 11797</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.424	Priority creditor's name and mailing address <u>Savas, Marion</u> <u>3530 Henry Hudson Parkway, Apt. 15D</u> <u>Bronx, NY 10463</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.425	Priority creditor's name and mailing address <u>Schader, Karen and Chuck</u> <u>247 West 12th Street, Apt. 1B</u> <u>New York, NY 10014-1992</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.426	Priority creditor's name and mailing address <u>Schaffer, Estelle</u> <u>1545 East 22nd Street</u> <u>Brooklyn, NY 11210</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.427	Priority creditor's name and mailing address <u>Schalet, Phyllis</u> <u>1 Townhouse Place, Apt. 1PQ</u> <u>Great Neck, New York 11021</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:	

Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.428** Priority creditor's name and mailing addressSchanoes, April141 East 3rd Street, Apt. 12BNew York, NY 10009

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.429** Priority creditor's name and mailing addressSchebe, Carol6307 Harcourt RoadClifton, NJ 7013

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.430** Priority creditor's name and mailing addressSchneider, Joan2 Bay Club Drive, Apt.7NBayside, NY 11360

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.431** Priority creditor's name and mailing addressSchulman, Steven108 Main StreetNorwalk, CT 6851

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.432** Priority creditor's name and mailing addressSchultz, Ruby35 Seacoast Terrace, Apt.15GBrooklyn, New York 11235

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.433** Priority creditor's name and mailing addressSchuman, Shanni183 Broad Street, Apt. 1Bloomfield, NJ 7003

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.434** Priority creditor's name and mailing addressSchutte, PaulaTicket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

\$Unknown\$Unknown

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name _____

Case number (if known) 17-11572 (SHL)

250 East 87th Street, Apt. 26F
New York, NY 10128
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.435 **Priority creditor's name and mailing address**
Schwartz, Jean
653 East 14th Street, apt 2B
New York, NY 10009
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.436 **Priority creditor's name and mailing address**
Schwartz, Jerry
189 2nd Avenue, Apt. 4N
New York, NY 10003
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.437 **Priority creditor's name and mailing address**
Schwartz, Louise
346 Audubon Road
Englewood, NJ 7631
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.438 **Priority creditor's name and mailing address**
Schwartz, Stephanie
61 Hazelton Drive
White Plains, NY 10605
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.439 **Priority creditor's name and mailing address**
Schwartz, Stephen
2327 Meridian Boulevard
Warrington, PA 18976
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.440 **Priority creditor's name and mailing address**
Schwarz, Rochelle
44 Greenhill Road
Springfield, NJ 7081
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒
- No
-
- ☐
- Yes

2.441 Priority creditor's name and mailing address
Seiden, Sara
101-20 Ascan Avenue
Forest Hills, NY 11375Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.442 Priority creditor's name and mailing address
Shiffer, Marion
112 Lee Road
Scarsdale, NY 10583Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.443 Priority creditor's name and mailing address
Silberman, Linda
405 West 23rd Street, Apt 16E
New York, NY 10011Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.444 Priority creditor's name and mailing address
Silliman, Jean
380 Rector Place, Apt 20D
New York, NY 10280Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.445 Priority creditor's name and mailing address
Silverman, Rita
64 West 64th Street, Apt 28J
New York, NY 10023Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.446 Priority creditor's name and mailing address
Simon, Charlotte
75 Henry Street, Apt. 28A
Brooklyn, NY 11201Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.447 Priority creditor's name and mailing address
Simpson, Nancy
2050 Center Avenue, Suite 440
Fort Lee, NJ 7024As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.448 Priority creditor's name and mailing address

Singer, Adolf
80 La Salle Street, Apt 8G
New York, NY 10027

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.449 Priority creditor's name and mailing address

Singer, Richard
1329 Hollow Cove Road
Narberth, PA 19072

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.450 Priority creditor's name and mailing address

Sivak, Mary
2329 24th Street
Astoria, NY 11105

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.451 Priority creditor's name and mailing address

Skehan, Eileen
36 South Drive
Plandome, NY 11030

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.452 Priority creditor's name and mailing address

Skigen, Patricia
113 West 89th Street
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.453 Priority creditor's name and mailing address

Smith, Bernice
611 Palmer Road Apt.4P
Yonkers, NY 10701-5115

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.454 Priority creditor's name and mailing address <u>Smith, Daniel</u> <u>35 South Broadway, Apt. 3C</u> <u>Irvington, New York 10533</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.455 Priority creditor's name and mailing address <u>Smith, Floyd</u> <u>4 Peter Cooper Road, Apt 9G</u> <u>New York, NY 10010</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.456 Priority creditor's name and mailing address <u>Socoloschi, Nicolae</u> <u>102 Stillwell Road</u> <u>Leonardo, NJ 7737</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.457 Priority creditor's name and mailing address <u>Solana, Brandon</u> <u>561 10th Avenue, Apt. 10H</u> <u>New York, NY 10036</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.458 Priority creditor's name and mailing address <u>Solomon, Gloria</u> <u>1600 Parker Avenue</u> <u>Fort Lee, New Jersey 7024</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.459 Priority creditor's name and mailing address <u>Solomon, Matthew</u> <u>22 Hemptor Rd</u> <u>New City, NY 10956</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.460 Priority creditor's name and mailing address <u>Sood, Amit</u> <u>185 13th St</u> <u>Brooklyn, NY 11215</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.461 Priority creditor's name and mailing address

Sorensen, Harald
35 Academy Street
Pleasantville, NY 10570

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.462 Priority creditor's name and mailing address

Soter, Nicholas
500 East 77 Street, Apt 204
New York, NY 10162

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.463 Priority creditor's name and mailing address

Spalter, Dorothy
2775 East 16th Street, Apt. 1R
Brooklyn, NY 11235

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.464 Priority creditor's name and mailing address

Spano, Mark
515 Clinton Ave Apt 1
Brooklyn, NY 11238

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.465 Priority creditor's name and mailing address

Spector, Miriam
340 Fishers Road
Bryn Mawr, PA 19010-3656

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.466 Priority creditor's name and mailing address

Spencer, Isabel
11 West 30th Street, Apt. 12F
New York, NY 10001

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.467 Priority creditor's name and mailing address

Spinowitz, Bruce

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

95 Overlook Road
New Rochelle, NY 10804
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.468 **Priority creditor's name and mailing address**
Sprintzen, David
16 Southwoods Road
Syosset, NY 11791
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.469 **Priority creditor's name and mailing address**
Stark, Deborah
444 East 86th Street, Apt. 22A
New York, NY 10028
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.470 **Priority creditor's name and mailing address**
Steffen, Claire
132 East 35th Street #13L
New York, NY 10016
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.471 **Priority creditor's name and mailing address**
Stehlin, Stewart
460 West 24th Street, Apt 9E
New York, NY 10011
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.472 **Priority creditor's name and mailing address**
Stober, Carlene
474 48th Ave. Apt. 28F
Long Island City, NY 11109
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.473 **Priority creditor's name and mailing address**
Stoler, Iris Lee
175 Adams St., 16J
Brooklyn, NY 11201
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒
- No
-
- ☐
- Yes

2.474 Priority creditor's name and mailing address
Stumpf, Paul
88-01 35th Avenue, Apt. 2C
Jackson Heights, NY 11372Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.475 Priority creditor's name and mailing address
Subak-Sharpe, Genell
606 West 116th St
New York, NY 10027Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.476 Priority creditor's name and mailing address
Surgent, Gayla
888 Ramapo Valley Road
Mahwah, NJ 7430Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.477 Priority creditor's name and mailing address
Sussman, Robert
19 Hayhurst Road
New Rochelle, NY 10804Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.478 Priority creditor's name and mailing address
Sutel, Seth
214 Riverside Dr, Apt. 308
New York, NY 10025Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.479 Priority creditor's name and mailing address
Swift, Oliver
4 Stone Avenue
White Plains, NY 10603Date or dates debt was incurred
UnknownLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

\$Unknown \$Unknown

2.480 Priority creditor's name and mailing address
Tanenbaum, Szilvia
1095 Park Avenue
New York, NY 10128As of the petition filing date, the claim is:
Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.481 Priority creditor's name and mailing address

Tanzer, Leonard
3000 Ocean Parkway, Apt. 9U
Brooklyn, NY 11235

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.482 Priority creditor's name and mailing address

Tausig, Mark
145 Park. Place Apt 2F
Brooklyn, NY 11217

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.483 Priority creditor's name and mailing address

Teirstein, Alice
160 Riverside Drive, Apt. 2B
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.484 Priority creditor's name and mailing address

Teshima, Anne
225 West 106th St, Apt 3H
New York, NY 10025

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.485 Priority creditor's name and mailing address

Thornton, William
885 6th Avenue, Apt. 34D
New York, NY 10001

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.486 Priority creditor's name and mailing address

Thurston, William
319c Casa Loma Road
Morgan Hill, CA 95037

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.487 Priority creditor's name and mailing address <u>Tiefer, Leonore</u> <u>300 First Avenue, Apt. 8F</u> <u>New York, NY 10009</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.488 Priority creditor's name and mailing address <u>Tindiglia, Barbara</u> <u>86 Highfield Road</u> <u>Harrison, NY 10528</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.489 Priority creditor's name and mailing address <u>Toise, Claire</u> <u>160 West End Avenue, Apt. 3U</u> <u>New York, NY 10023</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.490 Priority creditor's name and mailing address <u>Tom, Martha</u> <u>188-50 C. 71st Crescent</u> <u>Fresh Meadows, NY 11365</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.491 Priority creditor's name and mailing address <u>Tomes, Robert</u> <u>132 Brighton Street</u> <u>Staten Island, NY 10307</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.492 Priority creditor's name and mailing address <u>Toms, Fred</u> <u>45 West 11th Street, Apt 1B</u> <u>New York, NY 10011</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.493 Priority creditor's name and mailing address <u>Toole, Lee</u> <u>4141 41st Street, Apt 3R</u> <u>Sunnyside, NY 11104-3240</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.494 Priority creditor's name and mailing address
Trentlyon, Robert
409 West 21st Street, Suite 1
New York, NY 10011

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.495 Priority creditor's name and mailing address
Trost, Ellen
6 Craven Lane
White Plains, NY 10605

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.496 Priority creditor's name and mailing address
Tufa, Mihaela
83 Oakwood Village #5
Flanders, NJ 7836

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.497 Priority creditor's name and mailing address
Tufino, Grace
2160 Wallace Avenue, Apt. 4E
Bronx, NY 10462

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.498 Priority creditor's name and mailing address
Tumolo, Margarita
2983 Young Ave
Bronx, NY 10469

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.499 Priority creditor's name and mailing address
Uddin Khan, Evelyn
75 Sheldon Street
Central Islip, NY 11722

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)

2.500 Priority creditor's name and mailing address
Ullmann, Mary

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No
☐ Yes

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

42 Brookwood Drive
Stanhope, NJ 7874
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.501 Priority creditor's name and mailing address

Valbiro, Anthony
62 Columbus Avenue
Port Chester, NY 10573

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.502 Priority creditor's name and mailing address

Van Kirk, Thomas
139-16 224 Street
Laurelton, NY 11413

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.503 Priority creditor's name and mailing address

Vasquez, David
237 East 54th Street, Apt. 3B
New York, NY 10022

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.504 Priority creditor's name and mailing address

Vogel, Jane
9 West Welling Avenue
Pennington, NJ 8534

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.505 Priority creditor's name and mailing address

Vojnovic, Judith
3145 Brighton 4th Street, Apt. 415
Brooklyn, NY 11235

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.506 Priority creditor's name and mailing address

Waggett, David
44 Gordonhurst Ave
Montclair, NJ 7043

Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒ No
☐ Yes

2.507 Priority creditor's name and mailing address

Walsh, Robert
123 Edgewood Avenue
Clifton, NJ 7012

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

\$Unknown \$Unknown

2.508 Priority creditor's name and mailing address

Wanderer, Peter
20 Harvard Road
Shoreham, NY 11786

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

\$Unknown \$Unknown

2.509 Priority creditor's name and mailing address

Ware, Leslie
396 Rowayton Ave
Norwalk, CT 6854

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

\$Unknown \$Unknown

2.510 Priority creditor's name and mailing address

Warnke, Marie
680 Albin Street
Teaneck, NJ 7666

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

\$Unknown \$Unknown

2.511 Priority creditor's name and mailing address

Warshauer, Irene
505 East 79th Street, Apt. 4B
New York, NY 10075

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

\$Unknown \$Unknown

2.512 Priority creditor's name and mailing address

Warshaw, Monique
1150 Park Ave. Apt 8A
New York, NY 10128

Date or dates debt was incurred
Unknown

Last 4 digits of account
number

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

\$Unknown \$Unknown

2.513 Priority creditor's name and mailing address

Watson, Dorothy
201 West 72 St
New York, NY 10023

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated

\$Unknown \$Unknown

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.514 Priority creditor's name and mailing address

Weber, Peter
171 Woodchuck Road
Stamford, CT 6903

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.515 Priority creditor's name and mailing address

Weck, Alan
555 North Avenue, Apt. 26T
Fort Lee, NJ 7024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.516 Priority creditor's name and mailing address

Weeks, Stephen
299 Pavonia Avenue, Apt. 2-11
Jersey City, NJ 7302

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.517 Priority creditor's name and mailing address

Weingarten, Seymour
55 Central Park West
New York, NY 10024

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.518 Priority creditor's name and mailing address

Weiss, Richard
175 East 62nd Street, Apt. 6D
New York, NY 10065

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.519 Priority creditor's name and mailing address

Weissberg, Norbert
PO Box 570
East Hampton, NY 11937

Date or dates debt was incurred

Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

As of the petition filing date, the claim is:

\$Unknown

\$Unknown

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No

☐ Yes

2.520 Priority creditor's name and mailing address <u>Weissberger, Karen</u> <u>207 East 37th Street, Apt. 3H</u> <u>New York, NY 10016</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.521 Priority creditor's name and mailing address <u>Weissman, Polly</u> <u>110 Riverside Drive, Apt. 11S</u> <u>New York, NY 10024</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.522 Priority creditor's name and mailing address <u>Wellington, Sheila</u> <u>249 East 48th Street, Apt. 16C</u> <u>New York, NY 10017</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.523 Priority creditor's name and mailing address <u>Wells, Frieda</u> <u>1530 Palisade Avenue, Apt. 5H</u> <u>Fort Lee, NJ 7024</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.524 Priority creditor's name and mailing address <u>Weltman, Susan</u> <u>18-50 211th Street Apt 3A</u> <u>Bayside, NY 11360</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.525 Priority creditor's name and mailing address <u>Wesely, Marcy</u> <u>45 Sutton Place South, Apt. 10L</u> <u>New York, NY 10022</u> Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket Refund</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.526 Priority creditor's name and mailing address <u>Wexler, Pamela</u> <u>55 West 92nd Street, Apt. 6E</u> <u>New York, NY 10025</u> Date or dates debt was incurred <u>Unknown</u>	As of the petition filing date, the claim is: <u>\$Unknown</u> <u>\$Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim:

Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.527** Priority creditor's name and mailing addressWhitmore, Deborah140 West 22nd Street, Apt. PHCNew York, NY 10011

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.528** Priority creditor's name and mailing addressWink, Judith145 West 93rd Street, Apt. 2New York, NY 10025

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.529** Priority creditor's name and mailing addressWolff, Arnold95 Joralemon StreetBrooklyn, NY 11201

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.530** Priority creditor's name and mailing addressWong, William76 Harbor KeySecaucus, NJ 7094

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.531** Priority creditor's name and mailing addressWoodruff, Marjorie25 Clifton TerraceWeehawken, NJ 7086

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.532** Priority creditor's name and mailing addressYatzkan, Elaine275 West 96 Street, Apt. 6NNew York, NY 10025

Date or dates debt was incurred

UnknownLast 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(7)**2.533** Priority creditor's name and mailing addressYazdzik, MartinTicket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

☒ No☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

310 green street
honesdale, PA 18431
Date or dates debt was incurred
Unknown

Last 4 digits of account
number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

2.534 **Priority creditor's name and mailing address**
Zabriskie, Everett
252 Highwood Ave
Ridgewood, NJ 7450
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.535 **Priority creditor's name and mailing address**
Zagardo, Donald
86-54 208th Street, Apt. 3G
Queens Village, NY 11427
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.536 **Priority creditor's name and mailing address**
Zeigler, Sue
3249 Hull Avenue
Bronx, NY 10467
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.537 **Priority creditor's name and mailing address**
Zilay, Catherine
16 Rock Ledge Avenue, Apt. 6C2
Ossining, NY 10562
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.538 **Priority creditor's name and mailing address**
Zimmer, Sharon
1105 Park Avenue, Apt. 14D
New York, NY 10128
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

2.539 **Priority creditor's name and mailing address**
Zwick, Burton
244 Kent Place Boulevard
Summit, NJ 7901
Date or dates debt was incurred
Unknown
Last 4 digits of account
number _____

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

- ☒ No
☐ Yes

2.540 Priority creditor's name and mailing address

Zwick, Carol
600 West End Avenue, Apt. 4C
New York, NY 10024

Date or dates debt was incurred
Unknown

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: \$Unknown \$Unknown
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Ticket Refund

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims		Amount of claim
3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.		
3.1 4Wall Entertainment, Inc. 35 State Street Moonachie, NJ 07074 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2 A New Miller Ltd Waverley House, 7-12 Noel Street London, W1F 8GQ, England Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$6,629.24</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3 Able Fire Prevention Corp. 241 West 26th Street New York, NY 10001 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4 Abrams Artist Agency c/o Amy Wagner 275 Seventh Ave. 26th Floor New York, NY 10001 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5 Action Environmental Services 300 Frank W. Burr Boulevard, Suite 39 Teaneck, NJ 07666 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6 Actors' Equity Association 165 West 46th Street New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.7	Aetna Inc. 151 Farmington Avenue Hartford, CT 06156 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Agency for the Performing Arts 135 West 50th Street, 17th Floor New York, NY 10020 Attn: Beth Bickers Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Alliance of Repertory Theatres New York 520 Eighth Avenue, Suite 319 New York, NY 10018 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	American Archiving & Shredding P.O. Box 767 Orange, NJ 07051 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Storage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	AppRiver, LLC 1101 Gulf Breeze Parkway, Suite 200 Gulf Breeze, FL 32561 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	ArtSink 74 East 7th Street #2A New York, NY 10003 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	ASCAP 1900 Broadway New York, NY 10023 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.14	Audience Rewards LLC 250 West 52nd Street, Stage Door – 4th Floor New York, NY 10019 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Avaya Financial Services P.O. Box 550599 Jacksonville, FL 32255 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Leased Equipment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	BankDirect Capital Finance Two Conway Park, 150 North Field Drive, Suite 190 Lake Forest, IL 60045 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Batchelor, Jeremy 421 Degraw Street, LL-K Brooklyn, NY 11217 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Bates, Carol Neuls- and William 2 Fifth Avenue, Apt. 20U New York, NY 10011 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Blake Electric Contracting Co. 311 East 150th Street Bronx, NY 10451 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,989.31</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Blake Prime Service, LLC. 83-40 72nd Drive Glendale, NY 11385 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$5,635.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.21	Blake Zidell & Associates, LLC 321 Dean Street, #5 Brooklyn, NY 11217 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,000</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Botchan, Rachel 200 Schermerhorn Street, Apt 521 Brooklyn, NY 11201 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	C&S International Insurance Brokers Inc 19 Fulton Street, #308A New York, NY 10038 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Choi, Jiin 550 West 157th Street, Apt. 36 New York, NY 10032 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Clinton Housing Development Company 300 West 46th Street New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Consolidated Edison Company of N.Y. Inc. P.O. Box 138 New York, NY 10276 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Courier Car Rental, Inc. 1241 Route 23 South Wayne, NJ 07470 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Car Rental</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.28	Crichton, Jean and Gunhouse, Robert 173 Summit Avenue Summit, NJ 07901 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Crowley, Michael 25-20 37th Street Astoria, NY 11103 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Cuskern, Dominic 218 West 10th Street, Apt 6A New York, NY 10014 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,518.61</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	D&D Productions 251 Summit Avenue Hackensack, NJ 07601 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$5,675</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Daily, Dan 138 Cupsaw Drive Ringwood, NJ 07456 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Dave Bova 295 East 139th Street Bronx, NY 10454 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Department of Theatre Arts Rutgers University 2 Chapel Drive New Brunswick, NJ 08901 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.35	Doussant, Diana Leading Artists 145 West 45th Street, Suite 1000 New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Equity League Pension and Health Trust Funds 165 West 46th Street, 14th Floor New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Flyleaf Creative, Inc. 134 West 26th Street, Suite 604 New York, NY 10001 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Formula 1 Cleaners 780 East 134th Street Bronx, NY 10454 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Laundry</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Fund for the City of New York 121 Avenue of the Americas New York, NY 10013 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$195,800.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40	GHP Media 475 Heffernan Drive West Haven, CT 06516 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,289.43</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.41	Goldmark, Sandra 680 West 204th Street, Apt 4C New York, NY 10034 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

		Amount of claim
3.42	Grapeseed Media, LLC 79 Madison Avenue New York, NY 10016 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$30,000</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Greenberg-Perkus, Karen 330 West 28th Street, Apt. 9A New York, NY 10001 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Greenhall Agnes 3840 Greystone Avenue Bronx, NY 10463 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	Hillbolic Arts & Carpentry c/o The Ken Larson Co. Inc. 29 Old Route 9 West Tomkins Cove, NY 10986 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Huber, Jane and Benner, James 256 Pine Avenue Manasquan, NJ 08736 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	IATSE General Office 207 West 25th St., 4th Fl. New York, NY 10001 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Impressive Cleaning Services Inc. 8418 108th Avenue Ozone Park, NY 11417 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,890</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

		Amount of claim
3.49	Ink, Sordelet 46 Forest Street Montclair, NJ 07042 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Inwood, Mike 5405 Webster Street Philadelphia, PA 19143 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Jackson, Helen 21 Trinity Place, Apt 301 Montclair, NJ 07042 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	JPMorgan Chase Bank, N.A. P.O. Box 659754 San Antonio, TX 78265 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>29,821.47</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	Keen, Linda and Bresin, Jonathan 160 West End Ave 17E New York, NY 10023-5610 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	Khan, Evelyn Uddin 75 Sheldon Street Central Islip, NY 11722 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55	Kirkwood, Chloe Props - Hangar Theater P.O. Box 205 Ithaca, NY 14851 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	Larson, Joan L.	As of the petition filing date, the claim is: \$ <u>Unknown</u>

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
	12 York Terrace Short hill, NJ 07078 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	Laws, David Andrew 2121 Foster Avenue, Apt 17 Brooklyn, NY 11210 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Log-On 520 8th Avenue, 14th Floor New York, NY 10018 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Maher, Carmen Anthony and Gerard 301 East 69th Street, Apt. 11G New York, NY 10021 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	Marathon Consulting, LLC. 181 North 11th Street, Suite 106 Brooklyn, NY 11211 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>14,577</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	Marian Rothenberg Household 48 South Park Street, Unit 314 Montclair, NJ 07042 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Mark Orsini. Bret Adams. Ltd. 448 West 44th Street New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Martin, Susan and Belzer, Alan	As of the petition filing date, the claim is: \$ <u>Unknown</u>

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
	One Fifth Avenue, Apt. 20 C New York, NY 10003 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Mason, Sally Q. 315 East 88th Street, Apt. 2B New York, NY 10128 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Massachusetts Mutual Life Insurance Company 1295 State Street Springfield, MA 01111 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$46,440.90 Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	McGuire, Maureen and Wong, William 76 Harbor Key Secaucus, NJ 07094 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	McLaughlin, Margaret and Pepper, Bert Kendall on Hudson, #4006 Sleepy Hollow, NY 10591 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	McMaster-Carr Supply Company P.O. Box 7690 Chicago, IL 60680 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Michael Griffo a/a/f Seth Reiser ICM Theatre Department 65 East 55th Street New York, NY 10022 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Mitchell, William and Anderson, Jean	As of the petition filing date, the claim is: \$ <u>Unknown</u>

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
	25 Bay Street Bronx, NY 10464 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	New York Musical Festival 36 West 44th Street, Suite 1010A New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	NYC & Company 810 7th Avenue, 3rd Floor New York, NY 10019 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Parker, Caroline J. H. 116 Chilton street Elizabeth, NJ 07202 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Pendleton, Austin c/o Bret Adams 448 West 44th Street New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Phantom Audio c/o Judy Mauer 270 West 17th Street New York, NY 10011 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>12,800</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.76	Rabinowitz, Frances and Dalin, Herbert 315 Sixth Avenue, Apt 3 Brooklyn, NY 11215 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: \$ <u>Unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.77	Reich, Heidi 1851 7th Avenue, Apt. 21 New York, NY 10026 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Russ Rowland Photography 118 West 75th Street, Apt 1B New York, NY 10023 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Saifee Hardware & Garden 114 1st Avenue New York, NY 10009 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Samuel French, Inc. 235 Park Avenue South, 5th Floor New York, NY 10003 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.81	Schall & Ashenfarb 307 5th Avenue, 15th Floor New York, NY 10016 Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$8,525</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.82	Spectrum Business 41-61 Kissena Boulevard Flushing, NY 11355 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Stage Directors and Choreographers Society 321 West 44th Street, Suite 804 New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.84	Susan Schulman Literary Agency LLC 454 West 44th Street New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$8,109.84</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.85	Sussman, Marianne and Robert 19 Hayhurst Road New Rochelle, NY 10804 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.86	Tanne, Janice Hopkins 251 Central Park West New York, NY 10024 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Tennessen, Nora 50 Greene Ave #6C Brooklyn, NY 11238 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	The Fellowship for the Performing Arts c/o Aruba Productions, LLC 1674 Broadway, 3rd Floor New York, NY 10019 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.89	The Lighting Syndicate LLC 315 West 39th Street, Suite 304 New York, NY 10018 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,500</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.90	The SDC – League Pension and Health Funds c/o Benserco Inc. 140 Sylvan Avenue, Suite 303 Englewood Cliffs, NJ 07632 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

		Amount of claim
3.91	TheaterMania.com Inc. 1156 Avenue of the Americas, 5th Floor New York, NY 10036 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Two River Theater Co. 21 Bridge Avenue Red Bank, NJ 07701 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	Tyco Integrated Security LLC 47-40 21st Street Long Island City, NY 11101 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,028.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	United Scenic Artists, Local 829 29 West 38th Street, 15th Floor New York, NY 10018 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95	UPS P.O. Box 7247-0244 Philadelphia, PA 19170 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.96	Verizon P.O. Box 15124 Albany, NY 12212 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Telecommunications</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.97	White, Sheila and Richard 683 10th Street Brooklyn, NY 11215 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor The Pearl Theatre Company, Inc.
Name

Case number (if known) 17-11572 (SHL)

		Amount of claim
3.98	Xerox Financial Services P.O. Box 202882 Dallas, TX 75320 Date or dates debt was incurred <u>Unknown</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 4: **Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$20,241.61 +
Unknown

5b. Total claims from Part 2

5b. + \$408,689.73 +
Unknown

5c. Total of Parts 1 and 2

5c. \$428,931.34 +
Unknown

Fill in this information to identify the case:

Debtor name The Pearl Theatre Company, Inc.
United States Bankruptcy Court for the: Southern District of NY
Case number (If known): 17-11572 (SHL) Chapter 7

☐ Check if this an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

93. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

94. List all contracts and unexpired leases**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	State what the contract or lease is for and the nature of the debtor's interest	<u>Lease for the premises located at</u> <u>553 West 42nd Street</u> <u>New York, NY 10018</u>	<u>Massachusetts Mutual Life Insurance Company</u> <u>c/o Cornerstone Real Estate Advisers LLC</u> <u>180 Glastonbury Boulevard, Suite 200</u> <u>Glastonbury, Connecticut 06033</u> <u>Attention: Christine Hovey, Vice President</u>
	State the term remaining	<u>15 years</u>	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	<u>Employment contract for Hal Brooks</u> <u></u>	<u>Hal Brooks</u> <u>553 West 42nd Street</u>
	State the term remaining	<u>Expired on June 30, 2017</u>	<u>New York, NY 10018</u>
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest	<u>Avaya Phone System for the premises</u> <u>located at 553 West 42nd Street</u>	<u>Avaya Financial Services</u> <u>P.O. Box 550599</u>
	State the term remaining	<u>Unknown</u>	<u>Jacksonville, FL 32255</u>
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest	<u>New York City Department of Cultural</u> <u>Affairs Lighting Equipment</u>	<u>New York City Department of Cultural Affairs</u> <u>31 Chambers St</u>
	State the term remaining	<u>Unknown</u>	<u>New York, NY 10007</u>
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest	<u>Xerox Copy Machine</u> <u></u>	<u>Xerox Financial Services</u> <u>P.O. Box 202882</u>
	State the term remaining	<u>Unknown</u>	<u>Dallas, TX 75320</u>
	List the contract number of any government contract		

Debtor name The Pearl Theatre Company, Inc.

United States Bankruptcy Court for the: Southern District of NY

Case number (If known): 17-11572 (SHL) Chapter 7

Official Form 206H
Schedule H: Codebtors

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

96. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor			Column 2: Creditor		
Name	Mailing address		Name	Check all schedules that apply:	
	Street CityStateZip Code			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
	Street CityStateZip Code			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
	Street CityStateZip Code			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
	Street CityStateZip Code			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	
	Street CityStateZip Code			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G	

Fill in this information to identify the case:Debtor name The Pearl Theatre Company, Inc.United States Bankruptcy Court for the: Southern District of NYCase number (If known): 17-11572 (SHL) Chapter 7**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors****12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 30 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ *Other document that requires a declaration* _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 8/3/2017
MM / DD / YYYY

X/s/ Patricia S. Marshall

Signature of individual signing on behalf of debtor

Patricia S. Marshall

Printed name

Chair of the Board of Trustees

Position or relationship to debtor